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Bib Data Sheet

CONFIRMATION NO. 9484

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|------------------------------------|---|---------------------|-------------------------------|--------------------------------------|
| <b>SERIAL NUMBER</b><br>10/801,082 | <b>FILING OR 371(c) DATE</b><br>03/15/2004<br><b>RULE</b> | <b>CLASS</b><br>313 | <b>GROUP ART UNIT</b><br>2879 | <b>ATTORNEY DOCKET NO.</b><br>031204 |
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/661,931 09/15/2003 PAT 6,987,353 which claims benefit of 60/492,008 08/02/2003 *ms*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 05/31/2004

|   |   |                            |                           |                                |
|---|---|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>GA           | <b>SHEETS DRAWING</b><br>6 | <b>TOTAL CLAIMS</b><br>42 | <b>INDEPENDENT CLAIMS</b><br>5 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance |   |                            |                           |                                |
| Verified and Acknowledged   | Examiner's Signature <i>[Signature]</i> | Initials                   |                           |                                |

**ADDRESS**

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**TITLE**

Light emitting device having thio-selenide fluorescent phosphor

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>946 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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